

Date _____

Project Name _____

Material 1 _____

Dimensions _____

Material 2 _____

Dimensions _____

Fixture(s) _____

Origin(s) _____

Setup Notes _____



Image

Operations and Maintenance Checklist

BEFORE EACH USE	<input type="checkbox"/> Workpiece Secure	<input type="checkbox"/> PPE	<input type="checkbox"/> Router	<input type="checkbox"/> Lubrication	<input type="checkbox"/> Wiring
	<input type="checkbox"/> Work Area Clear	<input type="checkbox"/> Dust Extraction	<input type="checkbox"/> V-wheels	<input type="checkbox"/> Tram	<input type="checkbox"/> Proximity Switches
	<input type="checkbox"/> End Mill Secure	<input type="checkbox"/> Touch Probe	<input type="checkbox"/> V-rails	<input type="checkbox"/> Level	<input type="checkbox"/> Stepper Motors
	<input type="checkbox"/> Collet Condition	<input type="checkbox"/> Emergency Stop	<input type="checkbox"/> Belts	<input type="checkbox"/> Square	<input type="checkbox"/> Bolts/Screws

Tool Chain

	<u>End Mill</u>	<u>RPM</u>	<u>Feed Rate</u>	<u>Time (hours / minutes)</u>
1.	_____	_____	_____	_____ / _____
2.	_____	_____	_____	_____ / _____
3.	_____	_____	_____	_____ / _____
4.	_____	_____	_____	_____ / _____
5.	_____	_____	_____	_____ / _____
6.	_____	_____	_____	_____ / _____
			Total Cutter Time	_____ / _____

Total Project Time

Estimated (hrs/mins) _____ / _____	Start Time _____
Actual (hrs/mins) _____ / _____	End Time _____

Total Machine Hours

